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OPPEDAHL&LARSON

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## COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hareby declare that:

My citizenship, residence and post office address are as listed below next to my name.

I believe I am the original, first and [x] sole/[] joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled: Method and Kit for Characterization of Antiblotic-Resistance Mutations in Mysobacterium Tuberculosis

(a) ( i	is attached heret	<b>o</b> .			
(b) [ ]	was filed on	•	ation Serial No.	end was amended	
(c) [X]	was described a December 10, 1	nd claimed in Inter 999 and amended	national Application No. PCT	/CA99/01177 filed on	
includi	ing the claims, as	reviewed and unitered to the content of the content	edgment of Duty of Discloss derstood the content of the above. when the disclosure of the subject matter cis Regulations § 1.56(2).	ove idenumed specification,	61
365(c) insofe States acknowledges	of any PCT inter or as the subject m or PCT internation	national application in the same application in the sa	e claims of this application is r	_	1
(Applic	ation Serial No.)	(Fling Date)	(Szane)(patented, pending, ubetod	oned) (Petent No. if applicable)	•
(Applic	setion Serial No.)	(Filing Date)	(Status)(peternted.pending,aband	oned) (Patent No. If applicable)	-
- • •			Power of Attorney		

I hereby appoint Carl Oppedahl, PTO Reg. NO. 32,746 and Marina T. Larson, PTO Reg. No. 32,038, and D'Arcy Straub, PTO Reg. No. 47,113, of the firm of OPPEDAHL & LARSON LLP, having office at P O. Box 5068, Dillon, Colorado 80435-5088, as attorneys to prosecute this application and to transact all business in the Petert and Trademark Office connected therewith.

SEND CORRESPONDENCE TO:

021121

DIRECT TELEPHONE CALLS TO: OPPEDAHL & LARSON LLP (970)468-6600

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Ctaim for Priority

I hereby delim foreign priority benefits under 35 U.S.C. § 119 (a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign applications for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which forthe is claimed.

BAID APPLICATE COUNTRY	APPLICATION NO.	DATE OF FEING (daylmonth/year)	DATE OF ISSUE	PRIORITY CLARGED	CERTIFIED COPY ATTACHED
		(,-),,		YES[ ] NOL ]	YES[] NO[]
HORSING AREA STATE	ONION IT ANY, PILED MORE T	HAN 12 MONTHS (5 M	ONTHE FOR DESIGN) F	RIOR TO SAID APPL	CATION
COUNTRY	APPLICATION NO.	DATE OF FILING (day/month/year)	DATE OF ISSUE (day/month/year)	•	

Provisional Application

I hereby claim the benefit under 35 U.S.C § 118(e) of any United States provisional application(s) listed below.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by tine or imprisonment or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF BUILE OR FIRST INVENTOR	LAST NAME SHIPMAN	FIRST NAME ROBERT	MEDOLE NAME	
RESIDENCE S	CITY OF RENDENCE	STATE OR COUNTRY OF PRAIDENCE	COUNTRY OF CITEMISHIP	
	Mississauga	Ontario, Cenada	Canada	
POST OFFICE ADDRESS		onv	STATE/COUNTRY ZIP CODE	
130 Vista Boulevard		Miscissauga, Ontario	Canada L5M 1V9	
	, 23, 2001	SIGNATURE LOVUPINGEN		

Signature for additional joint inventor attached. Numer of Pages ...
Signature by Administrator(trix) or legal representative for deceased or

incapacitated inventor. Number of Pages

[] Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR § 1.47. Number of Pages \_\_\_\_

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